Form **8871**(July 2000)

Political Organization Notice of Section 527 Status

OMB No..1545-1693

General Information Name of organization BGIZAIPS Employer identification number Mailing address (P.O. Box or number, street, and room or suite number) City or town, state, and ZIP code E-mail address of organization 4b Custodian's address 4a Name of custodian of records M. Wehmeica 5a Name of contact person Jan Wehmerea I Notionapolis Business address of organization (If different from mailing address shown above). Number, street, and room or suite number City or town, state, and ZIP code Purpose Describe the purpose of the organization List of All Related Entities (see instructions) 8b Relationship 8a Name of related entity No no

ame	9b Title	y Compensated Employees (see instructions) 9c Address
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it is true, correct, and co	mplete.	med in Part I is to be treated as an organization described in section 527 of the ining accompanying schedules and statements, and to the best of my knowledge and b
Signature of aluthor	John Dec 71	7/28/2000 tom Barnes for